

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 10 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000038715 (3)

1. Corporation Name
H & H OIL, INC.



Principal Place of Business
15970 W SR 84
SUITE 265
FORT LAUDERDALE FL 33326

Mailing Address
15970 W SR 84
SUITE 265
FORT LAUDERDALE FL 33326

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

04/28/1997

4. FEI Number

05-0748925

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

Yes No

9. Name and Address of Current Registered Agent

SINGER, JOSEPH K ESQ.
201 NORTH UNIVERSITY DRIVE
SUITE 114
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name DONALD C. HYNDIS

82 Street Address (P.O. Box Number is Not Acceptable)
15970 W. STATE RD 84

83 Ste 265

84 City Ft LAUDERDALE FL 85 Zip Code 33326

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME HYNDIS, PATRICIA
STREET ADDRESS 1076 WEST S.R. #84
CITY-ST-ZIP FORT LAUDERDALE FL 33315

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D
1.2 NAME HYNDIS, PATRICIA
1.3 STREET ADDRESS 15970 W. STATE RD 84, #265
1.4 CITY-ST-ZIP Ft. LAUDERDALE FL 33326

2.1 TITLE V/T
2.2 NAME DONALD C. HYNDIS
2.3 STREET ADDRESS 15970 W. STATE RD 84, #265
2.4 CITY-ST-ZIP Ft LAUDERDALE FL 33326

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME 800002585658
4.3 STREET ADDRESS -07/10/98--01078--012
4.4 CITY-ST-ZIP ***165.00

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]*

0/5/98 954523-4079

CR2E034 (5/98)